

Chief complaints, diagnoses, and medications prescribed seven weeks post-Katrina in New Orleans

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Abstract:

BACKGROUND: In the aftermath of Hurricane Katrina, widespread flooding devastated the New Orleans healthcare system. Prior studies of post-hurricane healthcare do not consistently offer evidence-based recommendations for re-establishing patient care post-disaster. The primary objective of this study is to examine associations between patient characteristics, chief complaints, final diagnoses, and medications prescribed at a post-Katrina clinic to better inform strategic planning for post-disaster healthcare delivery (e.g., charitable donations of medications and medical supplies). METHODS: This study is a retrospective chart review of 465 patient visits from 02 September 2005 to 22 October 2005 at a post-Katrina clinic in New Orleans, Louisiana that was open for seven weeks, providing urgent care services in the central business district. Using logistic regression, the relationships between patient characteristics (date of visit, gender, age, evacuation status), type of chief complaint, final diagnosis, and type of medication prescribed was examined. RESULTS: Of 465 patients, 49.2% were middle-aged, 62.4% were men, 35% were relief workers, and 33.3% were evacuees; 35% of visits occurred in week five. Of 580 chief complaints, 71% were illnesses, 21% were medication refill requests, and 8.5% were injuries. Among 410 illness complaints, 25% were ears, nose, and throat (ENT)/dental, 17% were dermatologic, and 11% were cardiovascular. Most requested classes of medication refills for chronic medical conditions (n Euro Surveillance (Bulletin Europeen Sur Les Maladies Transmissibles; European Communicable Disease Bulletin) 121) were cardiovascular (52%) and endocrine (24%). Most illness-related diagnoses (n Euro Surveillance (Bulletin Europeen Sur Les Maladies Transmissibles; European Communicable Disease Bulletin) 400) were ENT/dental (18.2%), dermatologic (14.8%), cardiovascular (10.2%), and pulmonary (10.2%). Thirty-six percent of these diagnoses were infectious. Among 667 medications prescribed, 21% were cardiac agents, 13% pulmonary, 13% neurologic/musculoskeletal/pain, 11% antibiotics, 10% endocrine, and 9.3% anti-allergy. The likelihood of certain chief complaints, diagnoses, and medications prescribed varied with patient characteristics. CONCLUSIONS: Donations of certain classes of medications were more useful than others. Prevalence of select co-morbidities, the nature of patient involvement in recovery activities in the disaster area, and post-disaster health hazards may explain variations in chief complaints, diagnoses, and medications prescribed by patient characteristics.

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Resource Description

Communication: M

resource focus on research or methods on how to communicate or frame issues on climate change;

Climate Change and Human Health Literature Portal

surveys of attitudes, knowledge, beliefs about climate change

A focus of content

Communication Audience: M

audience to whom the resource is directed

Public

Exposure: M

weather or climate related pathway by which climate change affects health

Extreme Weather Event

Extreme Weather Event: Flooding, Hurricanes/Cyclones

resource focuses on specific type of geography

Ocean/Coastal

Geographic Location:

resource focuses on specific location

United States

Health Impact: M

specification of health effect or disease related to climate change exposure

General Health Impact

Intervention: M

strategy to prepare for or reduce the impact of climate change on health

A focus of content

Medical Community Engagement:

resource focus on how the medical community discusses or acts to address health impacts of climate change

A focus of content

mitigation or adaptation strategy is a focus of resource

Adaptation

Population of Concern: A focus of content

Population of Concern: M

populations at particular risk or vulnerability to climate change impacts

Elderly, Pregnant Women, Racial/Ethnic Subgroup

Climate Change and Human Health Literature Portal

Other Racial/Ethnic Subgroup: Not specified

Resource Type: **☑**

format or standard characteristic of resource

Research Article

Timescale: M

time period studied

Time Scale Unspecified

Vulnerability/Impact Assessment: №

resource focus on process of identifying, quantifying, and prioritizing vulnerabilities in a system

A focus of content